101215-174 Norris, McLaughlin & Marcus, P.A. Page 1 of 3

COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

METHOD FOR DETECTING INCREASED SUSCEPTIBILITY TO TUMORS

the specification of which was filed on December 14, 2004 as United States application Serial No. 10/518,317.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application	n(s)		Priority	Claimed
102 28 081.9 / (Number)	Germany / (Country)	18 June 2002 (Day/Month/Yr. Filed)	_ ⊠ yes	□ no
I hereby claim the benefit u listed below.	nder 35 U.S.C. § 119(e)	of any United States Provisio	nal Applicati	ion(s)
(Application Serial No.)	(Filing Date)	-		
listed below and, insofar as in the prior United States ap States Code, §112, I acknow	the subject matter of eac oplication in the manner p wledge the duty to discloses, §1.56(a) which occurre	tes Code, §120 of any United the of the claims of this application provided by the first paragraps and the material information as detected between the filing date of this application:	ation is not d oh of Title 35 fined in Title	isclosed, United
(Application Serial No.)	(Filing Date)	(Status) (patented, pending, a	 bandoned)	

Rec'd PCT/PTO 03 JAN 2006 NORRIS MCLAUGHLI 10/51831 FGE 08/13

101215-174 Norris, McLaughlin & Marcus, P.A. Page 2 of 3

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

27387

POWER OF ATTORNEY: As a named inventor, I hereby appoint

Practioners Associated with the

Customer Number: as my/our attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. DIRECT TELEPHONE CALLS TO: (212) 808-0700 Bruce S. Londa //) FULL NAME OF SOLE OR FIRST INVENTOR: DATE: 14.11.2004 INVENTOR'S SIGNATURE:___ RESIDENCE: Pohlandplatz 2, Dresden 01309 GERMANY DEX CITIZENSHIP: GERMAN POST OFFICE ADDRESS: SAME AS ABOVE FULL NAME OF SECOND INVENTOR: Helge TAUBERT DATE: INVENTOR'S SIGNATURE:___ CITIZENSHIP: GERMAN RESIDENCE: Wiese 14, Grossomer 06348 GERMANY POST OFFICE ADDRESS: SAME AS ABOVE FULL NAME OF THIRD INVENTOR: Timo HILLEBRAND INVENTOR'S SIGNATURE: DATE: RESIDENCE: Bogenstr. 29, Honow 15366 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: <u>SAME AS ABOVE</u> FULL NAME OF FOURTH INVENTOR: Peter BENDZKO INVENTOR'S SIGNATURE:___ DATE: ___ RESIDENCE: Ifflandstr. 32, Berlin 12623 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: SAME AS ABOVE

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	FOWER OF ATTORNEY: As a named inventor, I	hereby appoint	
	Practioners Associated with the Customer Number:	27387	
•	as my/our attorney(s) and/or agent(s) to prosecute to Peterts and Trademark Office connected therewith.	his application and to	ansact all business in the
	The undersigned hereby authorizes the U.S. after instrictions from the Assignce of this application as and Trademark Office regarding this application without and the undersigned.	to any action to be u	aken in the United States Paten
	DIRECT TELEPHONE CALLS TO: Bruce S. Londs (212) 808-0700		
	FULL NAME OF SOLE OR FIRST INVENTOR:	Aught Appen	
	INVENTOR'S SIGNATURE:		DATE:
·	RESIDENCE: Poblandplatz 2. Dresden 01309 GET POST OFFICE ADDRESS: SAME AS ABOVE		CITIZENSHIP: GERMAN
	STATE ADDRESS. SAME AS ABOVE		<u> </u>
2-01	JEULL NAME OF SECOND INVENTOR: HOLE	TAUBERT	
•	AVENTOR'S SIGNATURE: the land	1	DATE: 15.4.05
· .	POST OFFICE ADDRESS: SAME AS ABOVE	ANY DEX	CITIZENSHIP: GERMAN
	FULL NAME OF THIRD INVENTOR: Time H	71 1 000 4410	
	INVENTOR'S SIGNATURE:	•	1 A 1991.
	RESTORNCE BORENST 29 Honow 15366 GERM		PATE:
	POST OFFICE ADDRESS: SAME AS ABOVE		TITIZENSHIP: GERMAN
• •			
	FULL NAME OF POURTH INVENTOR: Peter	BENDRKO	
	INVENTOR'S SIGNATURE	D	ATE:
	POST OFFICE ADDRESS: SAME AS ABOVE	NY C	TTIZENSHIP: OFRMAN
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PAGE 9/13 * RCVD AT 1/3/2006 4:37:41 PM [Eastern Standard Time] * SVR:USPTO-EFXRF-6/27 * DNIS:2738300 * CSID:2128080844 * DURATION (mm-ss):04-00

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NORRIS MCLAUGHLIN 10/518317 18

101215-174 Norris, McLaughlin & Marcus, P.A. Page 2 of 3

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punished by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint

Practioners Associated with the 27387 > Customer Number: as my/our attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. **DIRECT TELEPHONE CALLS TO:** Bruce S. Londa (212) 808-0700 FULL NAME OF SOLE OR FIRST INVENTOR: Axel MEYE INVENTOR'S SIGNATURE: DATE: CITIZENSHIP: GERMAN RESIDENCE: Pohlandplatz 2, Dresden 01309 GERMANY POST OFFICE ADDRESS: SAME AS ABOVE FULL NAME OF SECOND INVENTOR: __Helge TAUBERT INVENTOR'S SIGNATURE: DATE: __ RESIDENCE: Wiese 14, Grossomer 06348 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: <u>SAME AS ABOVE</u> 7) FULL NAME OF THIRD INVENTOR: INVENTOR'S SIGNATURE: -->-DATE: 15. 11. 2005 RESIDENCE: Bogenstr. 29, Honow 15366 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: SAME AS ABOVE FULL NAME OF FOURTH INVENTOR: Peter BENDZKO DATE: 21 . // INVENTOR'S SIGNATURE: RESIDENCE: Ifflandstr. 32, Berlin 12623 GERMANY CITIZENSHIP: GERMAN POST OFFICE ADDRESS: <u>SAME AS ABOVE</u>

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101215-174 Norris, McLaughlin & Marcus, P.A. Page 3 of 3

TO FULL NAME OF FIFTH INVENTOR: Katharina KRÜGER	1 1 1 0 0
INVENTOR'S SIGNATURE: LORGE COMO UDI	DATE: 13.11.05
RESIDENCE: Siegfriedstr. 202, Berlin 10365 GERMANY	CITIZENSHIP: GERMAN
POST OFFICE ADDRESS: SAME AS ABOVE	
FULL NAME OF SIXTH INVENTOR: Matthias KAPPLER	·
INVENTOR'S SIGNATURE:	DATE:
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FULL NAME OF SEVENTH INVENTOR: Manfred WIRTH	
INVENTOR'S SIGNATURE:	DATE:
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		101215-174 Norris, McLaughlia & Marcus, P.A. Page 3 of 3
	FULL NAME OF FIFTH INVENTOR: Katharina KROGER	
	INVENTOR'S SIGNATURE	DATE:
	RESIDENCE: Sieghisdatr. 202. Berlin 10365 GERMANY	_ CITIZENSHIP: GERMAN
	POST OFFICE ADDRESS: SAME AS ABOVE	
6-07	FULL NAME OF SIXTH INVENTOR: Mathias KAPPLER	
	ENVENTOR'S SIGNATURE: Mafflia Virgo	DATE: 17.11.05
	RESIDENCE: Lessingst. 27. Halle 06104 GERMANY	_ citizenship: <u>German</u> ~
	POST OFFICE ADDRESS: SAME AS ABOVE	
	FELL NAME OF SEVENTH INVENTOR: Manifed WIRTH	
	INVENTOR'S SIGNATURE:	DATE:
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101215-174 Norris, McLaughlin & Marcus, P.A. Page 3 of 3

	FULL NAME OF FIFTH INVENTOR: Katharina KRÜGER INVENTOR'S SIGNATURE: RESIDENCE: Siegfriedstr. 202, Berlin 10365 GERMANY POST OFFICE ADDRESS: SAME AS ABOVE	DATE:CITIZENSHIP:GERMAN
	FULL NAME OF SIXTH INVENTOR: Matthias KAPPLER INVENTOR'S SIGNATURE: RESIDENCE: Lessingstr. 27, Halle 06104 GERMANY POST OFFICE ADDRESS: SAME AS ABOVE	DATE:CITIZENSHIP:GERMAN
7-00	FULL NAME OF SEVENTH INVENTOR: Manfred WIRTH INVENTOR'S SIGNATURE: RESIDENCE: Ludwig-Richter-Str. 11, Dresden 01326 GERMANY ROST OFFICE ADDRESS: SAME AS ABOVE	DATE: M. M. L& CITIZENSHIP: GERMAN